

PTO/SB/21 (09-04)
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/612,811
	Filing Date	July 3, 2003
	First Named Inventor	Kenneth J. Kozak
	Art Unit	1645
	Examiner Name	Unknown
Total Number of Pages in This Submission	Attorney Docket Number	100736.0529311

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Response to Notice of Incomplete Reply; Return Portion of Formalities Letter; Check (\$300); Return Postcard.
<input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Frost Brown Todd LLC		
Signature			
Printed name	Stephen R. Albainy-Jenei		
Date	March 3, 2005	Reg. No.	41,487

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature			
Typed or printed name	Aaron B. O'Dom	Date	March 3, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Express Mail No. EV090691854US

Customer No. 26874
PATENT TRADEMARK OFFICE
Atty. Docket: 100736.0529311



IN THE UNITED STATES PATENT & TRADEMARK OFFICE

Appl. No. : 10/612,811 Confirmation No. 8191
Applicants : Kozak, Kenneth J.
Filed : July 3, 2003
Title : IMMUNOASSAY FOR
H.PYLORI IN FECAL
SPECIMENS USING
GENUS SPECIFIC
MONOCLONAL
ANTIBODY
TC/A.U. : TBA
Examiner : TBA
Docket No. : 100736.0529311
Customer No : 26874

RESPONSE TO NOTICE OF INCOMPLETE REPLY

Mail Stop MISSING PARTS
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Notice of Incomplete Reply (Nonprovisional), Applicant submits the following:


1. Check in the amount of \$300; and
2. Return portion of Formalities Letter.

The Commissioner of Patents and Trademarks is hereby authorized to charge any fees or credit any overpayment to Frost Brown Todd LLC's Deposit Account No. 06-2226 for any additional charge or credit associated with this Response.

Appl. No. 10/612,811
Response dated Thursday, March 3, 2005
Reply to Notice of Incomplete Reply of February 24, 2005

CERTIFICATE OF MAILING

I hereby certify that a copy of this correspondence is being deposited with the United States Postal Service as Express Mail in an envelope addressed to Mail Stop Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on March 3, 2005.



Aaron B. O'Dom

Respectfully submitted,

Kenneth J. Kozak



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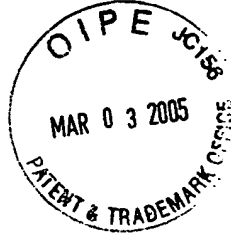


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APPLICATION NUMBER	FILING OR 371 (c) DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
10/612,811	07/03/2003	Kenneth J. Kozak	100736.0529311

26874
 FROST BROWN TODD, LLC
 2200 PNC CENTER
 201 E. FIFTH STREET
 CINCINNATI, OH 45202



CONFIRMATION NO. 8191

FORMALITIES LETTER



OC000000015271381

Date Mailed: 02/24/2005

NOTICE OF INCOMPLETE REPLY (NONPROVISIONAL)

Filing Date Granted

The U.S. Patent and Trademark Office has received your reply on 02/01/2005 to the Notice to File Missing Parts (Notice) mailed 10/19/2004 and it has been entered into the nonprovisional application. The reply, however, does not include the following items required in the Notice.

The period of reply remains as set forth in the Notice. You may, however, obtain EXTENSIONS OF TIME under the provisions of 37 CFR 1.136 (a) accompanied by the appropriate fee (37 CFR 1.17(a)).

A complete reply must be timely filed to prevent ABANDONMENT of the above-identified application. Replies should be mailed to: Mail Stop Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria VA 22313-1450.

The applicant needs to satisfy supplemental fees problems indicated below.

The required item(s) identified below must be timely submitted to avoid abandonment:

- Additional claim fees of \$300 as a small entity, including any required multiple dependent claim fee, are required. Applicant must submit the additional claim fees or cancel the additional claims for which fees are due.

SUMMARY OF FEES DUE:

Total additional fee(s) required for this application is \$300 for a Small Entity

- Total additional claim fee(s) for this application is \$300
 - \$300 for 4 independent claims over 3.

Replies should be mailed to: Mail Stop Missing Parts
 Commissioner for Patents
 P.O. Box 1450

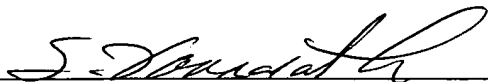
03/07/2005 ZJU HAR1 00000047 10612811

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Alexandria VA 22313-1450

A copy of this notice MUST be returned with the reply.



Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE